

POSITION	INITIALS	ID NO.	DATE
	<i>HS</i>		<i>03/16/00</i>
FEE DETERMINATION			
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW	<i>NH</i>	<i>017</i>	<i>9 122 100</i>
RESPONSE FORMALITY REVIEW	<i>Request</i>	<i>925</i>	<i>04-CH-01</i>

### INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral) ... Canceled      A ..... Appeal  
 ÷ ..... Restricted      O ..... Objected

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If more than 15C claims or 10 actions  
staple additional sheet here

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